

## Key Considerations for Family Recovery Residences

*Provided by the National Association of Recovery Residences Standards Review Board*

**Please note:** this is a list of considerations to operate with best practices; this is not a list of best practices or standards.

- Carefully review your state laws concerning activities falling under a licensure requirement for running a childcare facility, to ensure a license is not required.
- Best practices issues to consider include:
  - the length of the parent's recovery prior to entry into the home,
  - whether the lack of staff available at a Level 1 or 2 would constrain the recovery process, as opposed to a Level 3 or 4.
- The child is not viewed as the 'resident' – only their parent is.
- Policies regarding Department of Public Health and Human Services involvement and communication.
- Depending upon the age of the child, the recovery residence may need to "childproof" the home for electrical outlets, stairs, gates, stair rails and such.
- Consider whether to add an "age out" provision other than 18. (Note, most children become adults at age 18.)
- The recovery residence must verify that there is a constant caregiver for the child, the nature and extent of which would differ depending upon the age of the child.
- Consider what zoning laws are implicated in your state regarding children in a home regarding density, square footage requirements, septic tank limitations, and any other issues re zoning in your state.
- If the operator allows pregnant women in the house, what arrangements are made for the mother with child after birth.
- The recovery residence must obtain appropriate insurance liability for the parents with children residence.
- State laws must be thoroughly reviewed and understood regarding definition of 'child' (and subsequent age considerations).